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ABSTRACT

To meet the need of additional personnel to deliver more effective services to the increasing number of handicapped and disadvantaged persons a regional training conference on Support Personnel was held. The objectives of the conference were to: (1) discuss and evaluate the functions of support personnel, (2) review existing recruitment methods of agencies using support personnel, (3) evaluate functions establishing career ladder positions of support personnel, and (4) discuss factors that limit or increase utilization of support personnel. The report consists of two sections: (1) eight papers presented at the conference (2) summaries of the workshop sessions by three different groups. (Author/MC)

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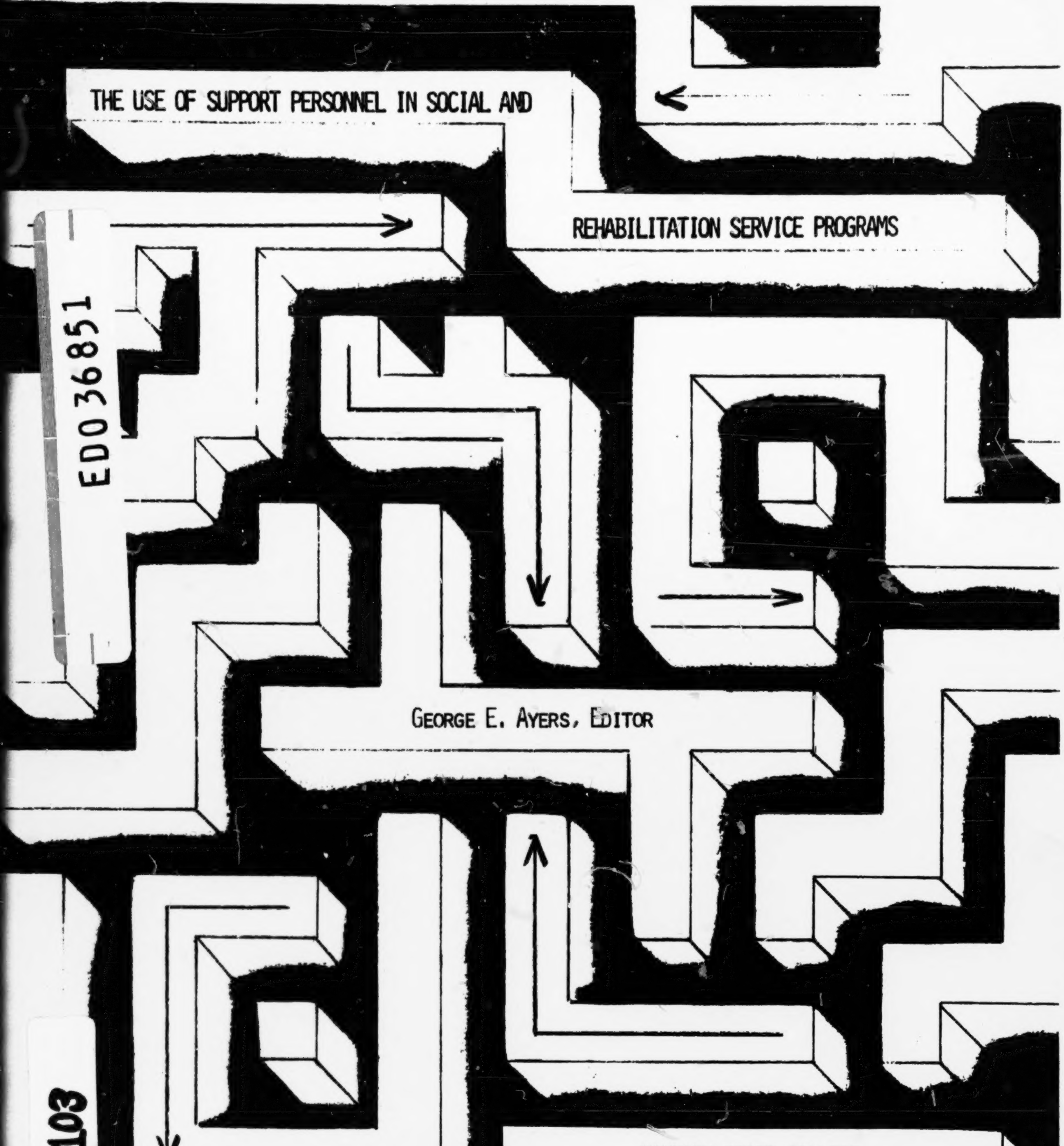

THE USE OF SUPPORT PERSONNEL IN SOCIAL AND REHABILITATION SERVICE PROGRAMS

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THE USE OF SUPPORT PERSONNEL IN SOCIAL AND REHABILITATION SERVICE PROGRAMS

Proceedings of a Regional Conference held at the
President Hotel, Kansas City, Missouri, May 7-9, 1969

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FOREWORD

During the past years, it has become increasingly evident that social and rehabilitation service programs must develop new patterns of personnel utilization. The development of existing service programs and establishment of new ones in health, rehabilitation and welfare systems makes it imperative that we devise more effective methods of delivering services to the increasing number of handicapped and disadvantaged persons. These demands have critically overtaxed the capacity of traditional staffing practices.

If social and rehabilitation service programs intend to meet the complex needs of the handicapped and disadvantaged, it is incontestable that additional personnel are needed. We need to follow the models of other professional fields and establish new positions with selected duties that require knowledge at levels less than full professional preparation. Moreover, social and rehabilitation service programs must seriously consider the utilization of support personnel. In response to this need, a regional (Region VI) training conference on "The Use of Support Personnel in Social and Rehabilitation Service Programs" was held at the President Hotel in Kansas City, Missouri, May 7-9, 1969.

The objectives of the Conference, which was sponsored by Mankato State College in cooperation with the Rehabilitation Services Administration, were to: (1) discuss and evaluate those factors related to the functions of support personnel; (2) review existing recruitment and selection methods being employed by those agencies utilizing or planning to utilize support personnel; (3) assess and evaluate those administrative, program planning, and service functions which will permit the establishment of career ladder positions for such personnel; and (4) discuss those factors that limit or increase the proper utilization of support personnel in meeting manpower shortages.

The Conference participants (61) included representatives from State merit systems, State vocational rehabilitation agencies, State agencies for the blind, welfare agencies, crippled children's services, medicaid programs, mental retardation agencies, and the SRS regional office in Region VI.

The success of the Conference was due to the efforts of many people--Mr. Ralph Susman, Associate Regional Commissioner and Mr. George Kester, Associate Regional Representative, RSA, Region VI, the planning committee, the Conference faculty, and, most of all, the participants themselves. It is hoped that this publication of proceedings will be useful and provide impetus to further planning, development and utilization of support personnel in SRS programs.

G. E. A.

SECTION I: PAPERS

PLANNING FOR THE EFFECTIVE UTILIZATION OF SUPPORT PERSONNEL IN SOCIAL AND REHABILITATION SERVICE PROGRAMS

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Within the period of time assigned me, I wish to present some definitions, one way of planning for a use of a range of personnel including support personnel, and provide a philosophical base for their utilization. When I talk about personnel I am talking about the range of personnel from beginner through vocational, technical and the professional or doctoral degrees. This is important when we look at the differential use of staff in the delivery of services.

DEFINING SUPPORT PERSONNEL

None of the terms subprofessional, support personnel, or para-professional seem very acceptable to any of the groups involved. In fact, research is showing terms that imply the assisting of someone else, such as assistant or aide, carry the connotation of less value and imply that there is less than a total job for this individual.

The definition developed by the Social and Rehabilitation Service (SRS) Central Office Task Force* on Support Personnel refers to persons in a variety of positions in the planning, administration, and delivery of health, social, and rehabilitation services. The duties of the position are composed of tasks that are an integral part of the agency service responsibilities to people which can be performed by persons with less than a college education--high school graduates or persons with little or no formal education.

The new careers program was established with the passage of the Scheurer amendments administered by the Department of Labor. This program was designed to provide job opportunities for poor persons, especially in such areas as medicine, rehabilitation, and social work. The need for new manpower resources and the effective utilization of all personnel are vital to delivery of a wide range of services. Herein lies the key to the new Federal regulations. The intent of these regulations is to create a framework for furnishing the manpower needed to provide services.

We need to use a more systematic approach to manpower planning. This implies that before one can determine the types of manpower needed, one must make a clear determination of what the program is, the goals to be achieved, the operating objectives in terms of target groups, and the tasks necessary to achieve the objectives. When these factors are determined one is ready to plan the necessary manpower.

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* Consists of representatives from all Social and Rehabilitation Service programs

DEFINING SYSTEMS ANALYSIS

When I use the term systems analysis or functional job analysis, I am not discussing systems approach from purely the computer-complex technology which is often mistakenly thought of as system analysis. Rather I am talking about a way of looking at agency objectives and activities--a way that is different from what we have done in the past but is generally consistent with basic administrative theories and may give us a handle for solving some of the social problems. The systems concept is both an analytical tool (a way of studying what the agency is and what it does) and a management tool (a way of making and implementing management decisions).

Computers and complex technology are useful in systems analysis, particularly in working with data needed to make decisions based upon the available resources, whether in money, services, or manpower. The systems approach is the main effort of the modern world to come to grips and work out problems of organizational behavior.

One of our problems in dealing with the provisions of services in our programs is the lack of analysis and evaluation of the effectiveness of programs as to whether or not the services delivered actually accomplished the particular program objectives. The system analysis approach does help to identify major problems of organizations that prevent these organizations from accomplishing their intended purpose.

There are several reasons for using a more systematic analytic approach. They are to:

1. Maximize the delivery of services. This is the most important reason. How can we reach the largest number of people most effectively and efficiently in view of the needs of people in this society?

2. Optimize and make the best use of available manpower--that is, the time and costs needed to produce adequately prepared workers and the quality and quantity of social services at a more reasonable cost benefit relationship

3. Minimize the friction in the system--that is, minimize the gaps, delays, and inefficiencies in the service delivery system, the underuse of scarce professional staffs, low worker morale, and so forth

Using the system analysis concept involves the assumption of process change. It is not static; at any point in time when we are looking at an agency operation, examining the program goals, and services directed to improve the lives of people, we are looking at the program in a slice of time as any other analytic approach might do. We should examine our organizations to determine what they are doing and what they should be doing and put in information to alter the impact of the organization on the service delivery system.

There is no doubt that in any of our programs in SRS we are a long way from meeting the needs of the people of this country. On the income maintenance side the needs of people are being met at a minimal level and in quite different levels across the country. Services needed to improve family life and to provide opportunity for children and youth with respect to education and employment are not proceeding at a very fast rate. In the field of rehabilitation, although 200,000 people were rehabilitated last year, the waiting list of those persons considered feasible for rehabilitation is now over three million.

When we consider changes in the service delivery system, we are all trying to see what can be the most effective use of our program resources (money) and the impact from the varied use of manpower. Therefore, when we are looking at support personnel, as such, they should be examined in relation to what is needed to be done in order to produce the result we want in way of service and to create, improve, or revise jobs that will add to the service system of the particular agency.

PLANNING FOR PERSONNEL UTILIZATION

The idea of a system approach to planning implies "boundaries" at any given point in time. When an agency system is being looked at we have to identify the boundaries which may be law, money, or the nature of the location of the problem. The idea would be that there might be different ways of approaching the problems in relation to the kinds of problems we are working on at a given time.

The administrative planning for the use of a wide range of staff, therefore, will require a disciplined systematic approach to program development, decision making, and manpower utilization. In SRS programs, the charge has been made to us to provide a high quality of service with sufficient quantity to make a significant impact on the social problems facing the nation. Therefore, we must determine new ways of approaching problems which will make use of a wide range of personnel.

One problem which faces us when we consider support personnel is the feeling that we are taking away from the professional and permitting persons with less education or knowledge to assume a professional task. I would like to use two research studies as examples, because they illustrate some of the problems that we have to deal with in the present administrative framework. Moreover, the findings of these two studies show part of our difficulty in making effective use of a wide range of personnel.

The first example is a study in which a comparison was made of work performed by persons holding a bachelor's degree with others holding a master's degree in social work in the determination of eligibility and the provision of services. Results of the study showed there was little difference in the quality of performance of these two groups. This was very upsetting to people in the field of social work.

In the field of rehabilitation, a study of rehabilitation counselors and rehabilitation support personnel was conducted to determine how each group carried out the initial study of a person coming in for rehabilitation services. This research also showed that there was little difference in performance between support personnel with high school education and staff with master's degrees in rehabilitation counseling.

In each study, when one examines the tasks the staff were assigned to do, two things become apparent. In the field of social work the major tasks set by the agency were the determination of eligibility, verification of the necessary facts, collection of data on the social or family history, and the decision to offer environmental services which included getting people to employment, nursing homes, doctors or nurses, or referred to vocational rehabilitation.

When one examines the level of knowledge and skill needed to perform these tasks, it is clear that a person with a bachelor's degree could perform them as well as one with a master's degree. The setting of the agency controls limited staff activity. Therefore, the use of persons with a master's degree to do those levels of tasks was wasteful. At the same time there were other jobs or tasks needed to meet needs of the people that went undone because of the time demand to provide coverage of eligibility and the social study and because the agency did not require services at a master's level of knowledge and skill. In the rehabilitation study the same thing occurred. Staff were performing the task of collecting the family history, making the rehabilitation study, discussing with the client what it was he wished in the way of vocational training, making appropriate referrals to the doctor or vocational guidance person, etc. Again, when one looks at the knowledge and skill needed for those tasks, it is readily apparent that they are at a level that both groups could do as well and do not require the level of knowledge and skill of an individual with a master's degree. An analysis of tasks, that is, what tasks have to be done and what kinds of people will be needed with what levels of knowledge and skill, is a necessary first step in making differential use of staff. Both studies indicated that we haven't clearly defined the professional tasks as contrasted to tasks that could be performed by individuals with less than professional education.

In establishing new viable jobs, just giving the person the same job or sluffing off the menial chores from one job to another does not solve the problem. Last summer all of the research funded under 1115, RSA or 1110, OEO in new careers or subprofessional jobs was reviewed. One thing became clear; there has to be a viable job for any range of personnel from the entry position to the professional position. There has to be something that can be described, accomplished, and measured.

I want to describe one demonstration which illustrates in a sense how one goes about examining the agency program goals, objectives, services, and staffing. In a particular welfare program, the administrator was very much concerned with what to do about what is called the multi-problem family receiving aid to families with dependent children. These families have been called the hard-core families and most everyone considers them a risk in undertaking rehabilitation efforts. However, the administrator wanted to demonstrate that by changing his service program methodology, he could stop the present cycle of dependency and assure that the children growing up in a family would have a better opportunity, a real chance of breaking out of the cycle of dependency. They selected approximately three hundred families where (1) there was no man in the family, (2) the mother was the second generation (that is, she had received public assistance as a child), (3) there were five or more children and (4) the agency felt the family was practically doomed to failure.

The program goal was clearly designed to provide those services that might give the opportunity to the children in the family to have a better family life. There were three clear objectives which are as follows:

1. To provide help in child care, nutrition, family management, and money management
2. To help the mother take charge of her life and prepare for a different type of participation in the community and in the care of her children
3. To see that the youth were educated and prepared for a vocation

The agency started out with the traditional pattern of staffing. The director's position was assigned to a person with a master's degree in social work. There were five bachelor degree social workers and one family assistant to each bachelor degree worker. It became immediately apparent that the demands of the services would require a different staffing pattern. The family assistant needed to be free to work with the families. The assignments given to the family worker, who had a high school education or less, were day-by-day advice on counsel and instruction to the family in child care, family management, cooking, and nutrition. The person with the bachelor's degree was to work primarily with the mother in helping her understand her feelings and attitudes, gain control of the family, and consider her future including self-support. The person with the master's degree was used for reviewing the services and helping in areas which seemed to require more education to solve the problem.

All of the staff members were trained in terms of their prospective roles. Each had a particular job to do, and they worked as a team. At the end of the project period, the staffing had changed quite dramatically. It became quite clear that you could not teach people how to care for children, cook, manage money, etc., with a visit once a quarter as in the previous system. The family workers were beginning to spend two, three, or four hours a week with each mother.

The project has been operating for three years. The real effects will not be known until we see whether the children are able to hold productive jobs and have decent families as they grow up. Some of the older youth who are now in vocational training or on jobs indicate the experiment may be a success. Some of the mothers have obtained additional education, vocational training, and employment.

The staffing at the end of the project was very interesting. The subprofessional staff (support personnel) was almost four times as many as at the beginning. Subprofessional staff numbered twenty instead of five. Also at the other end of the range of personnel two more professional staff were added because the families had such serious problems that the best professional advice and counseling was needed.

Another important development was the team approach to the family. There were a variety of staff working with the family members. The traditional pattern of a caseload assigned to one worker was completely changed. If the agency adopts these findings, there will be great change in the organization of the agency and provision of services.

Job Analysis and Career Design

Following this illustration I would like to give some principles on job analysis and career design. How do you go about looking at your present service system? How do you look at the kinds of tasks that need to be done and then how do you create and design new jobs? The material I am using here has for the most part been developed by people such as Churchman (from his material on systems approach), of work completed in the Department of Labor in developing the Dictionary of Occupational Titles, with work that has been going on in the field of personnel in the differential use of staff, and from material developed by Dr. Sydney Fine of the Upjohn Institute on Employment Research.

I am proposing that we look at the designing of jobs and agencies from the standpoint of the program goal and services needed and then assigning tasks to personnel as contrasted to what you might call the breakdown approach, i.e., taking a present job and pulling out the less difficult aspects of the job.

Describing jobs is part of a problem of perception. There is always more to a job than meets the eye. Often job descriptions fail to capture the complexity involved in the job-worker education. The first problem of an agency, the program staff, the training specialist, and the technical job analyst is to develop a sharpened perception of what it takes to complete a job or accomplish the goal. One of the ways of looking at total performance is to look at the job-worker situation from the following three points of view.

1. What gets done (technology). The methods, techniques, or procedures a worker uses to make a product or to achieve a result

2. What the worker does (worker function). That is, the physical, mental, interpersonal activities of the worker which come into play as a worker utilizes the technologies of his job

3. Worker skills--specific content, functional and adaptive skills required and what it takes to stay on the job

When we look at tasks, we begin to clarify what a task does, what it is expected to accomplish, and what kinds of instruments will be used to achieve it. For example, if one develops a schedule that involves obtaining information so that it can be compared across the country, the construction of its questions will need to be clear. The staff person doing this would have to have a high level of knowledge about forms design, terms, research, and program purpose.

Characteristics of Jobs

An important concept is that a job involves a worker as a whole person--physically, mentally and interpersonally. We must avoid seeing a person simply as an instrument to execute specific tasks. Research in the personnel field shows that a person must like to work and be on the job. There has to be a combination of activities that hold the interest of the person and also sufficient activities that make demands on the person's capabilities. He must be able to see that he is being used, that there is a result of his services, that he has a place, and that whatever he does is important to the agency.

A second concept is that all jobs, no matter where we are or what kind of job we do, involve things, data, and people. Things are like a telephone, typewriter, or pencil. Data refers to the collection of facts, demographic, financial or property. People are supervisors, bosses, and community members. For the most part every job has some relationship in these areas and some jobs are predominantly related to one or the other. For example, data is basic and primary for the accountant or the researcher.

Some jobs are more related to people such as the social worker, rehabilitation counselor, doctor, or nurse. In setting up jobs we begin to examine the kinds of tasks and group tasks in relation to things, data, and people and in relationship to complexity or difficulty. Whether we are at the top of the professional level or the top of the agency, we will at times do the lowest level of tasks. Also, we may be dealing with tasks we have not been trained for.

In the material I gave you this morning there is a chart which describes data, things, and people. It looks like three triangles. This table is taken from a book by Dr. Sidney Fine entitled Guidelines for the Design of New Careers. You will notice that the things, data, and people which are most difficult or complex are at the top. This will give you some idea of how you may classify tasks. Attached to the material are some definitions for each of the levels that indicate levels of tasks. This material has been tested for a great many occupational titles. We are now testing the definitions in terms of social services. For example, if you would look at the definition of coaching on the "People Function Scale" and my example of the family worker providing help on family management and child care, you would find the worker "befriended and encouraged individuals on a personal caring basis, gave instruction, advice, and personal assistance concerning the activities of daily living, the use of various institutions, services, and participation in groups." Now equate the knowledge and skill area within our present education system. In my judgment it falls somewhere between high school and eighth grade education in terms of the knowledge and skill.

Now looking at an example in which the rehabilitation counselor talks to the individual about serious surgery and is involved in the person's inner feelings, it might fall at the seventh level. This definition deals with individuals in terms of their overall life adjustment behavior. Decisions are being made which affect the life of the person. In child welfare one of the activities that falls in this level is the final decision to remove a child from his natural parents, as contrasted to the coaching level in which you help parents learn to take care of the children. This is a type of distinction that this task analysis will permit us to make in examining our service tasks. This particular method is only one way of approaching job analysis. The reason I am using the material here, and the reason we have introduced it into the SRS, is because it seems to lend itself to a way of examining our kinds of jobs that have a mixture of work with people, things, and data. Moreover, it gives us a way of making some rough classifications of the level of difficulty. When you identify a series of tasks growing out of a program decision to give services, you may then find that there are groups of tasks that fall within a general level of complexity. For instance, if you look at data, you may find a way of grouping tasks into new types of jobs requiring different kinds of staff. For example, in the illustration of the family worker, the decisions and the provision of services around family management, child care, and involvement in the community could be assigned to staff without professional education. Therefore, you create a new job in the social service field.

In looking at staff in an agency that administers to more than one program, we are finding that the collection of data, such as family history, needed for all programs is similar. You might rearrange your staffing in terms of the tasks rather than the program base.

Once an agency determines its program objectives and the services to achieve them, there are always alternate methods of carrying them out. For example, if you use the device of collection of data through a schedule in the determination of eligibility for public assistance, this will have an immediate impact on the kind of staff you need. In this instance you need staff who can collect the information and interview or analyze to see if it is all on a form, in contrast to an administrative method where you say to the person, "Go out and get the information on your own." That would require a different level of competency.

Decisions have to be made as to the administrative structure and procedure, method, or technology to be used before you make your final decision in respect to staffing. When you group a series of tasks together of different complexities you have to set your knowledge and skill at the highest level of the task you are assigning in a given job, whether it is the data, people, or things category. For example, if you are using only two people in a given locality, both of those jobs would probably have to be established at a higher level than if you were in an urban areas and might be able to group a number of other tasks in several positions. The end result is you do not have job specifications that fit every locality. The class specification describes the limits, and the job description becomes tailor-made to the particular staff to be assigned specific tasks. In one instance, it might encompass a range of less difficult tasks that in another place would be handled by a separate person. However, because of the location of the job or the decision that the agency can only have one or two persons, it changes the job so that you select the individual with knowledge and skill to do the highest level task.

In social work and rehabilitation, there is every evidence that we ought to examine our task very carefully and see if through rearrangements and differential use of staff we can provide greater impact on the person needing service, particularly those needing the highest level of staff skill that can accomplish the task.

CONCLUSION

I would like to say in closing that in an hour's time I have only hit very lightly on some difficult concepts. In doing this, some of my concepts may have sounded very simple. The idea of looking at your service programs, program objectives, and then measuring the services to see if you accomplished these objectives means there has to be a balance between quality and quantity of services. This business of looking at and examining our program goals in specific terms and planning the manpower needs means hard work on the part of administrative personnel. It can be done. Demonstrations showed real potential for improvement in the lives of the people we serve by a different arrangement of our resources.

THE WYOMING AIDE UTILIZATION PROJECT

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I do not intend to discuss the methodological and statistical aspects that were employed in the project other than those relevant to the basic concept of utilization of para-professional personnel. A copy of the final report which contains the statistical techniques, methodology, and results we obtained in the project can be acquired from the Division of Vocational Rehabilitation, Cheyenne, Wyoming.

Before getting into the real substance of the paper I would like to present you with a brief description of the State of Wyoming. It is a relatively large land mass of approximately 98,000 square miles with a population of approximately 330,000. At the time that the project was conceived the State was divided into four geographical districts. The four districts each averaged about 24,000 square miles in area and were serviced by one vocational rehabilitation counselor. You, therefore, can imagine the amount of time spent traveling by the vocational rehabilitation personnel in the performance of their duties. One study we conducted indicated that many of our professional counselors were spending approximately 100 work days per year traveling to and from client locations. This was one of the primary reasons Wyoming developed the concept of utilizing para-professional personnel. By locating aides in some of the more remote rural areas we hoped to provide services in a more efficient manner. Also, by the use of the aide much of the routine clerical work, which had in the past taken up a large part of the counselor's time, could now be performed by them.

DEVELOPMENT OF THE WYOMING AIDE PROJECT

The people who were originally responsible for the creation of this particular project should be acknowledged. Dr. James Galloway, State Director of Vocational Rehabilitation, first conceived and developed the concept of the aide project. Mr. Robert Kelso, who succeeded Dr. Galloway as director of the State agency, was responsible for seeing the project through to its completion. It was funded by a research and demonstration grant from the Rehabilitation Services Administration which began on July 1, 1964, and terminated on June 30, 1967.

Purpose and Objectives

The project was formulated as a consequence of the inability of the Wyoming vocational rehabilitation agency to satisfy two basic assumptions in vocational rehabilitation. The first is "the basis of effective vocational rehabilitation is the close interpersonal relationship that must exist between the rehabilitation counselor and his client." Secondly, the steps in the rehabilitation process require relatively exact timing. This timing is dictated by the individual client's readiness to progress from one step to another. If the counselor is not available when the client is ready to progress in the rehabilitation program, then the rehabilitation process is retarded, stopped, or reversed. In many cases it was terminated because the client became dissatisfied and discouraged with the many delays.

One of our objectives was to demonstrate an administrative method of providing vocational rehabilitation services in sparsely settled geographical areas. Secondly, we wanted to evaluate the effectiveness of using paraprofessional women in providing vocational rehabilitation services while under the supervision and guidance of a professional rehabilitation counselor. We were also desirous of developing a system of more effectively utilizing the special talents of the vocational rehabilitation counselor for clients in these sparsely settled areas.

Our next objective was to evaluate the effectiveness of this particular administrative plan in extending and improving vocational rehabilitation services to clients living in the rural areas.

Finally, we wanted to demonstrate the effectiveness of utilizing the rehabilitation aides in small communities to develop and strengthen community and other agency support of the rehabilitation program. In the past many people felt that vocational rehabilitation was intentionally disregarding their community, the other agencies, and the disabled people in the community. In reality, it was simply a problem of time and space. It was impossible for the rehabilitation counselor to spend the amount of time required in any one community and still provide services to the other people in the rest of his district.

One other goal of the project was to create a meaningful, worthwhile occupation for a group of nonprofessionally trained women, thus returning them to the labor force and providing them with a source of self-satisfaction. This point was touched upon in a few of our panel discussions this morning--the idea of what we consider to be a satisfying or rewarding experience for a person in a work setting.

Criteria Used in Selecting the Aides

The first criteria we used in selecting an aide was his knowledge of the community. This was one of the first areas investigated by the district counselor. Factors such as participation or lack of participation in civic, church, business organizations, etc., were taken into consideration.

The second criteria in the selection of the aides was their acceptance by the community. In determining how well the potential aide was accepted by the community, the district counselor discussed the applicant with the local employment service, department of public welfare, school nurses, public health nurses, school administrators, and other people in the local community.

The third criteria was the applicant's ability in interpersonal relations. This was determined by using problem situations, both verbal and written, to which the applicant was asked to analyze and respond. We also had consulting psychologists and social workers interview the applicant to assist us in the selection process. Each applicant was requested to list references, and all references were contacted and the applicant was discussed with them.

The last selection criteria was an educational background such that the applicant would not be qualified to be employed as a full-time vocational rehabilitation counselor. We did not go into the communities with the idea of hiring master's level or doctoral level people who would be interested in doing this as a sideline. The project was focused towards the middle-class American housewife who had skills and interests in working with handicapped people.

Training and Supervising the Aides

After selection there were ten aides distributed in two districts. We felt that in order to obtain optimal benefits from the aides we should provide them with in-service training programs to acquaint them with vocational rehabilitation, its purpose, and their function and purpose as vocational rehabilitation aides. This was done in monthly group meetings which were held the first two days of each month. At these meetings emphasis was placed on orientation of the aide with various agency policies, State and Federal regulations, specific disabilities, eligibility criteria, and so forth. In conjunction with the two day a month in-service training, we had supervised field training available through the vocational rehabilitation counselor in the district. This was not done on a regularly scheduled basis in the sense that we allotted two or three days each month. It was done more on a case basis. The counselor would visit with the aide to discuss specific problems as they arose. We originally planned only the two types of aide training. However, after about eight months it was discovered we were experiencing some difficulty with the aides in terms of their relating to disabled people. We decided that it would probably have value to develop a sensitivity training program in which the aides could participate. We contracted with the University of Wyoming, and their counseling psychologists developed a sensitivity training program that would be applicable to the aides. This program was integrated into their regular in-service training program.

We found that aides were more motivated and interested in their jobs and learning if they were involved in actual problem-solving situations. Consequently, we used actual cases in most of the training sessions.

We experienced some problems when our aides were asked to go into other agencies to collect confidential information for a client's file. Since this was the first time that a project like this had been started in Wyoming, some of the other agencies were quite reluctant to divulge confidential information to someone they felt was less than a professional person.

Aide's Relationship with Clients

We have two sources of evidence that indicate the aides were able to develop and maintain a helpful relationship with their clients. Interviews were conducted with clients who had an aide working with them throughout the rehabilitation process, and overall the clients who had an aide working with them were much more favorable towards rehabilitation. They were also more realistic in terms of what their limitations and abilities were than were the clients residing in non-aide districts.

Information from the University of Utah's Regional Rehabilitation Research Institute indicates that not just clients but all people residing in areas with aides had more knowledge of rehabilitation and a more positive attitude towards rehabilitation than people residing in the non-aide areas.

CONCLUSION

In closing it is evident that the most significant contribution made by the para-professional personnel is one of extending our services to many people who might never have received them. We are convinced that the aide occupies a very essential position in our program and have made plans to expand the aide program throughout our State.

THE MINNESOTA AIDE UTILIZATION PROJECT

Marvin O. Spears
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St. Paul, Minnesota

The purpose of my presentation is to provide a brief overview of the Minneapolis Pilot Center Project and the involvement of the Minnesota Division of Vocational Rehabilitation (DVR). Then I would like to discuss the utilization of para-professional people in the Minnesota vocational rehabilitation agencies.

A few years ago the north side of Minneapolis was selected to be one of fourteen Pilot Center projects. The purpose of this project was to bring together a number of community services and agencies under one roof for the coordination and immediate delivery of services to the residents of a certain target area. In essence, the Pilot Center Project advocates a multi-service center approach to helping the handicapped and disadvantaged.

MINNESOTA DVR - PILOT CENTER COOPERATIVE PROJECT

DVR was asked to assist in the planning for the establishment of the Pilot Center Regional Center in 1967. We met with several resident groups and city officials who were involved in the initial planning phases. We spent a significant portion of our time with the people in the employment component of the regional center and made plans for adding a vocational rehabilitation component to the Pilot Center operation. Our planning resulted in the development and submittance of an application to the Rehabilitation Services Administration for an expansion grant to finance a cooperative project.

The primary objectives of the cooperative project were to expand vocational rehabilitation services to meet the needs of residents served by the Pilot Center Regional Center and coordinate these rehabilitation services with the services of other agencies in the area. We have served residents of North Minneapolis in the normal course of operations in our Minneapolis office. However, as you can well imagine, there was a great need for more intensive vocational rehabilitation services and better coordination with the community agencies. Another objective was to consolidate all of our existing services - the school-rehabilitation program and counselor caseload from North Minneapolis - as part of the Pilot Center operation.

Our grant application was approved in March of 1968. Our staff called for two rehabilitation counselors, one counselor aide, and two secretaries. The local residents who were involved in planning and operating Pilot Center assisted in the selection of the staff who were part of the vocational rehabilitation component.

PROJECT FINDINGS

We have just completed one year's experience with this project and have learned a great deal. Some of the things we have learned in the process of expanding vocational rehabilitation services to the Pilot Center area are summarized as follows:

1. We have a problem with respect to salaries and the recruitment of staff who have the right kind of qualifications to work in this very special setting. We were never able to hire all the staff that we had originally planned. Indeed, Mr. Morris Keaton, who will speak to you next, is our most stable staff member; he has been with us from the very start of the project.

2. For a Pilot Center or a multi-service center to function as a center, it is necessary to have a center. This may sound silly, but it is true. If you are going to have a service, you must have a place to provide it. There has been a problem with the location of the center. The various parts of the employment component have moved two or three times since last March, and this has created some problems in that the clients have had difficulty in locating the center. This problem has been resolved, and semi-permanent quarters have been established. A stable location is an important factor if the center is to be known and accepted in the community.

3. An experienced rehabilitation counselor who knows the vocational rehabilitation agency is an essential ingredient. We attempted to train a new person to work in this setting, but this did not work. Finally we were able to recruit an experienced counselor, and this has helped considerably in advancing the project.

4. It is significant that the community agencies in Minneapolis were more flexible than they had been given credit for in the past. Through the efforts of the various staff members and the director of Pilot Center, employment service and public health staff, and our counselors, we have established flexibility in providing services to residents of North Minneapolis. We have made some inroads in terms of getting special kinds of help for the Pilot Center. For instance, one of our large rehabilitation centers in Minneapolis made a special provision to take clients directly without any waiting period. They set aside a number of openings, and our clients could come in virtually the same day as they were referred. This is quite a departure. Also at our large city-county hospital, we were able to make some inroads in terms of setting up a special clinic for medical evaluations and in obtaining medical reports

more quickly. We were able to get the cooperation of a physician in the Northside area for other medical examinations so that we could initiate rehabilitation programs immediately.

5. We learned that in talking about interagency coordination we need to recognize that this takes talk and work. For a period of time our staff spent most of its time coordinating its activities with other units within the Pilot Center area, almost to the exclusion of helping people. We have to recognize that in coordination of many services of various agencies it is essential to allow enough time to establish the operating pattern, get an office or location, and recruit and train staff who are sensitive, perceptive, and able to work with clients of the center.

   The time it takes to work out the bugs in coordination and to know what other agencies are doing is time well spent. Time spent in this type of activity will tend to pay big dividends. It also takes time to explain clearly what you are doing. Our staff spent a great deal of time talking to groups and individuals informing them of vocational rehabilitation. I am sure that Mr. Keaton has told the rehabilitation story so many times that he can repeat it in his sleep. It is something that has to be repeated and repeated, and it is an essential part of establishing a multi-service center.

6. Last, and probably most relevant to our meeting, is the use of community residents to help carry out program activities. It is of crucial importance that you have people who know the community and who can tell the residents the purpose and functions of your agency. This communication skill, the ability to talk, is probably one of the most essential qualifications for a counselor aide or resident worker. We have to recognize that these people must be selected on the basis that they have this quality. They must be paid at a rate commensurate with this particular skill.

UTILIZATION OF COUNSELOR AIDES

I would like to mention very briefly the pattern of utilization that the Minnesota DVR has with respect to counselor aides. Under the direction of Mr. Ed Lane, our State Civil Service Department initiated studies about two or three years ago relative to the use of para-professionals in State government. I was privileged to work with some of his personnel in setting up a position that we call "Social and Rehabilitation Services Technician." This is a permanent position within our Civil Service system and is a social service assistant type job that is applicable to many different kinds of agencies. The people employed in this position may work in a correction, social work, child care, or rehabilitation setting.

Part of the process of setting up this position involved the encouragement of our junior colleges to establish training programs to prepare a supply of such persons. Two of our State junior colleges, and there may be more, have set up special training programs. Moreover, it is possible that one of our State colleges will be setting up an additional training program.

We in the vocational rehabilitation agency are moving with planned and deliberate speed in utilizing para-professional workers. We now have eight para-professional workers on our staff who fall into two general categories. One is the resident or community worker type whose major function is basically communication with the particular community. The second type is what we call a counselor or rehabilitation technician who not only performs traditional counselor functions, but may also perform certain functions that simply have not been provided by the agency in the past. These counselor technicians work in our larger district offices (St. Paul and Minneapolis) and in some of the cooperative programs. There have been special assignments in our State hospitals for the mentally ill and mentally retarded.

In terms of the reaction of our staff to para-professional personnel, I can say with a great deal of confidence that we have had no extensive opposition. Our staff has generally viewed the para-professional person as someone who is there to help them in their job. A tremendous amount of handicapped people come to our office for services, and we can't possibly handle them all. The counselors recognize that the clients have to be served and see the para-professional as one who can help them serve more clients. The para-professional, therefore, has been well accepted within our agency staff.

CONCLUSION

The urgency of the activity that we are taking up in Pilot Center, coupled with the kind of service that is being provided there and the need for considering the use of para-professional personnel, is brought to a good example in this story about a friend of mine. He thought of himself as somewhat of a classy golfer. One day on the course he was on one of the holes that just happened to go right alongside of a gravel road. He got up on the tee and hit a real whack and the ball went right out on to the gravel road, over the fence, and sat on the side of the road. Not to be dismayed he crawled over the fence and took a look at the ball. The ball was sitting on an ant hill. So he took a tremendous whack at the ball, missed it completely, and went right through the ant hill and killed about 1,000 ants. He straightened himself up and took another tremendous whack at the ball. He missed it again, went through the ant hill again, and killed another 1,000 ants. He did the same thing a third time, killing yet another 1,000 ants. As he was getting ready to make another swipe at the ball, one ant was heard saying to another, "If we are going to get out of this alive, we'd better get on the ball!"

THE REHABILITATION AIDE'S PERCEPTION OF HIS ROLE: MINNESOTA

Morris Keaton
Rehabilitation Aide
Division of Vocational Rehabilitation
Minneapolis, Minnesota

Pilot Center is easy to say, but it is not easy to play a role in. You are talking about serving 52,000 people, of whom four-fifths have lived on relief practically all their lives. They don't want anybody coming in with any vocational plans that will take them away from this kind of life. When the Division of Vocational Rehabilitation (DVR) hired me, I had to go through the same basic training program with the professionals before moving into the Pilot Center setting.

The counselor who went to Pilot Center with me was a new counselor. She was young and pretty, so the first problem she had was being able to communicate with the people of Pilot Center. The girls who came in there, who were few, decided that she didn't know anything because she was too young. The average guy was sent there by some agency that he had been leaning on, like the A.F.D.C and all the rest of the relief offices, and was hostile from the time he walked in the door until he left. She had another problem trying to communicate with this type of guy because as far as he was concerned all he wanted to do was look at her and nothing else. Therefore, many times she had to ask me to come and help her with a particular client. Many times I had to use the "street" language in order to get these people to listen to what I had to say.

At Pilot Center we follow program procedures (DVR). We have intake orientation classes and the intake interview which is solely my responsibility. I meet the client and inform him of the purpose and functions of DVR. I gather all the possible data on the client that I can. Some of them would hold back part of it, and I would have to gather all pertinent data the next week or so. Once he signs the application and I get his name I track down every little tidbit of information on him so that I can turn it over to the counselor. When I get through with the client I send him to the counselor's office and there he has his initial interview with the counselor.

Pilot Center was set up for speed. In other words, the way DVR used to work it would take up to a year to get the client into some type of vocational plan. In Pilot Center this is done in three or four days. Sometimes the very next day the client is placed in some vocational center for evaluation. If he hasn't had a medical or physical in the past six months, we take care of that before we let him go. If the counselor after his interview feels that the client needs evaluation from one of the programs at the center, I am called in again to make sure that he is picked up the next day and taken to the evaluation center.

I play my next role while the client is at the evaluation center. If there is any conference that comes up concerning the client and, for any reason, the counselor cannot be there it is my duty to be there. Some of the people who relate better to me get in touch with me and say they were only trying to get the relief man off their backs and they didn't want to go through with the evaluation. Because my counselor and I have the same ideas, I have to plan along the lines with the counselor. This is the only way it will work. So far we have been successful. With some of the real hard-core clients, both the counselor and I have to be at the conference because there was a lack of communication between the counselor and client other than through me.

WORKING WITH THE COMMUNITY

Another role I play is to keep the community informed of the role of DVR. You would be surprised in an area as large as this, how many people had never heard of DVR. So I had to constantly keep telling them about DVR. This includes the employers of people from the North side. I have to have a good working relationship with the key personnel of these companies because following up on our clients after job placement demands close communication.

CONCLUSION

In conclusion, my role as a counselor aide has been rewarding. Whoever is hired for a role like this must first understand that the counselor is a person to whom they will have to tune their thinking. They will have to plan along with the counselor and the client. If he doesn't do this you will find the client will start calling the office and asking for the counselor aide instead of the counselor. We had this experience, and there have definitely been those who said they did not want to talk to that counselor, but who wanted to talk to the counselor aide. To get this cleared up, the counselor and I both informed him that no matter who he talked to, he would get the same line of thinking. There will be no variation in the planning.

This comes a little hard sometimes for the counselor aide because he is a human being and all human beings sometimes feel that there could have been other ways to follow. There have been times when I sat in my office with the counselor and we discussed a case in point. He said he thought we should do something one way, and I felt he was wrong. But he is the counselor, so I follow his suggestions. But I will attempt to keep a client in the program, to keep him from getting away from us. This is something we can't have. We don't lose clients at Pilot Center. We keep clients at Pilot Center if I have to run all night.

Whoever hires a counselor aide should try to pick a person who is willing to modify his thinking to go step-by-step along with the counselor with whom he is working. Otherwise the role of a counselor aide will not work because it will cause too much confusion.

THE REHABILITATION AIDE'S PERCEPTION OF HER ROLE: WYOMING

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Division of Vocational Rehabilitation
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In my role as a rehabilitation aide, I play two roles by performing some secretarial duties in addition to my aide duties. My role begins with the initial interview of the client by explaining vocational rehabilitation services to him and ascertaining his eligibility. The client is given a survey and other forms to take home and complete, returning them in two to three days. We are able to gather a lot of information from the answers to the questions regarding their physical and psychological needs.

After completion of the survey, I then authorize the general medical examination, if their qualifications for services are met. This is one of the services the aides are authorized to do in the State of Wyoming. Also, all special examinations that may be required are authorized.

When all information is received, including references, medical examinations, employment history, school grades, and any testing that is required, the client is then introduced to the counselor. All final decisions are made by the counselor as to the acceptance into the program. The time span from initial interview to plan implementation may take up to three months, which is not nearly as fast as the previously discussed Pilot Center program. After the client has been approved for services, I initiate on-the-job training programs, contact the trainers, and establish program dates. I introduce the clients to the trainers and supply as much background information as the trainer deems necessary. The client is contacted during his training program periodically to see if any difficulties have been encountered that this agency should be aware of. After completion of a training program, follow-up work is continued with the client until he is employed.

Due to the fact that the counselor has two counties to cover which requires extensive travel, I am able to establish a closer relationship with some clients because I am available to assist them when the counselor is not in the office. Even though I am not able to solve the client's problems, they are able to confide their needs to me. This information is then related to the counselor. Any problems I am able to uncover while visiting the client's home are brought to the attention of the counselor. Problems that arise during the initial interview are discussed with the counselor prior to his meeting with the client.

I feel the image of vocational rehabilitation has greatly improved in our community. I have been a vocational rehabilitation aide for three and one-half years and have found that it takes time to become identified as such. During this calendar year I have been asked to speak to several organizations explaining vocational rehabilitation services, goals, and accomplishments in the community.

In performing the role of an aide, the person must be happy in his job and enjoy all phases of his work. Personally, I find it quite challenging and very rewarding. During my employment I have worked for three counselors and have served in a different capacity with each counselor. However, we do need to have a job description for rehabilitation aides.

CAREER PLANNING FOR SUPPORT PERSONNEL

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I would like to start the discussion this morning with some comments on the small group discussions yesterday afternoon, which I found very interesting and quite profitable from the standpoint of examining the use of a range of personnel. The groups were struggling with several points. If the support personnel did the kinds of tasks that were being described, this meant that many of those tasks were ones that case workers or rehabilitation counselors were used to doing also. If the kinds of tasks that were being done were done very well, then the question is what is the difference between the job of the professional social worker or counselor and that of the sub-professional. If sub-professional jobs are created by breaking away or peeling off certain activities from a given professional job without indicating what is to be different about the professional job, a problem in role and function is created. What should be added to the professional jobs becomes as crucial in the development of careers as setting up the tasks of the entry level or sub-professional job. Therefore, one cannot just establish a job description or class specifications of the entry position, but must examine tasks appropriate for each career point.

The second point that emerged is that in talking about the use of subprofessionals, agencies were attempting to place such personnel in the on-going system almost as if they could be added on like patches on a tire. One must examine the total system. Recently I was in a large city in which they employed (about eighteen months ago) some 200 professional people in a public welfare agency. They are still in the same entry jobs, and the agency had not taken the necessary steps to develop the opportunities for advancement. Of the 200, there are probably 20 or 25 who should have the opportunity for advancement or be provided with educational opportunities for advancement. Now the agency is faced with a difficult staff promotional problem. One is ready to organize a career system for the agency only after program goals are set, operating program objectives are identified, output areas clearly indicated, tasks needed to achieve the objectives, and organization of those tasks into jobs have been accomplished.

One of the points that I discussed yesterday also came up in the small group discussions. It takes time to undertake a systems approach to manpower utilization. When I said a long and hard time, I really wasn't thinking of time into the long future such as a year or six months, but I meant to imply that program analysis and job function analysis takes time. For example, I just worked with an agency where during a one-week period, program and manpower personnel sat down together and looked at the major programs and reached some major program operating decisions. Now a task force is working on the kinds of tasks needed to carry them out. This task force worked to determine tasks and the range of manpower needed to do the work. They will not come up with all the answers, but after about three weeks' work they will have developed some of the tasks that would be necessary to carry out program objectives and will have created new career lines.

There are four points that I would like to discuss this morning, starting from the premise that program objectives have been established and tasks have been identified and are beginning to be put into jobs.

CAREER DEVELOPMENT

First, in deciding what jobs should be created, there must be a range of personnel thus creating the career idea. The SRS requirements in all of the programs indicate that the sub-professional job becomes a part of the agency personnel system. This not only suggests but requires a range of personnel. This is quite different, especially for those of you in public welfare, where only one or two jobs requiring professional education have been identified. The new requirements make it clear that a range of personnel will be needed in all areas.

INTEGRATING SUPPORT PERSONNEL IN ON-GOING SYSTEMS

A second factor relative to manpower utilization is that all personnel have to be a part of the on-going system, although there is an exemption permitted for the recruitment and initial appointment of persons within the Merit System. This provides a way in which we can use recruitment as part of the selection process. These positions cannot remain exempt because the Federal regulations require that there be the opportunity for advancement into the system.

On the selection of individuals, there have been materials sent out by the Federal Office State Merit Systems for those of you from public welfare agencies who operate under the Merit System. The same information on recruitment was sent to the State vocational rehabilitation agencies that operate their own personnel systems. There is agreement with SRS that the methods and devices of personnel planning and arrangements would apply to the formalized merit system or under the regulations governing a personnel system within the rehabilitation program.

I want to make clear the chart which I passed out yesterday is not an organizational chart. It is labeled "Career Pathways" and was developed mainly to indicate what might be possible for individuals within an agency or within the public services. Careers are used in this particular chart in a different way than we have used them in the past in many of the merit system personnel systems. The chart on the left-hand side is under the general heading of "Services." These services might be available in a given agency or State and therefore there are possibilities of careers within service areas such as homemaker, child care, rehabilitation counseling or social work service. The idea is that we not try to subsume all jobs under one or two professions so that the career isn't necessarily limited to one area. Individuals have considerable choice among the human services and often up to the bachelor's degree level of education have opportunity to work in a variety of service areas. Therefore, this chart also illustrates the commonality of a level of knowledge and skill through social work, rehabilitation, child care, etc.

In considering career mobility, we are thinking about the ease with which people can move from one area of service into another area of service and can continue to vertically or diagnoally move upward. In the past the tendency was to have people start over in a new career at a lower level. For example, if an individual had been a home health aide, he would have to start at the bottom of the social work position if he wanted to work in that area. The idea of career mobility is to permit within the agency or the State personnel system much more transfer among internal State systems and hopefully between State systems.

TRAINING SUPPORT PERSONNEL

The agency has two choices in training support personnel. One is to prepare people before they enter the job, and the other is to provide training and educational opportunities after they are on the job. On training prior to entry there are several major resources open to us, particularly for the preparation for the entry level positions in any of the service areas. In the public welfare agencies there are two sources of training of people with low income and people receiving assistance at this point. One is the WIN (Work Incentive) Program in which recipients as part of the service side of the agency are provided training for productive employment. Therefore, it would seem that some of the pre-training of recipients for sub-professional staff could come from that source. In those counties that do not have a WIN Program, States as a part of the agency's service plan could include the training costs.

The Vocational Rehabilitation Act of 1968 makes money available for the training of handicapped people to serve in sub-professional positions in health, welfare and rehabilitation agencies. Therefore, people can be recruited and trained before they become employed with an agency. Also, there are training opportunities still available through the Department of Labor, OEO programs such as the Nelson Scheuer amendments to the OEO Act, M.D.T.A., and other programs.

We are recommending that the public welfare and rehabilitation agencies develop on-going working relationships with various agencies and educational institutions. In the long-range plan, it is the responsibility of educational institutions to provide people with basic knowledge and skills. Therefore, the Federal requirements do not contemplate the agency's undertaking to set up all educational and training programs. They do, however, contemplate that the agency undertake the in-service training for specific jobs by providing the specific content needed to accomplish the assigned task.

Once a person becomes a employee, the educational and training plans must be available to him. The SRS guides indicate that training for employees is a mandatory agency responsibility. Arrangements must be made with an educational institution, and the agency must continue in-service training activities. For example, the agency might plan release time for the attendance at the community college. There may be full-time educational leave with pay for people going into various professional and technical areas such as rehabilitation, accounting or data processing. How much and how far a program goes depends a great deal on what arrangements are going to be made with academic institutions.

This is a different approach in terms of training in public welfare where in the past little outside education has been provided. Also, it means some difference in the rehabilitation area where academic institutions have been used for in-service training with less follow-up on the job. So, in a sense, all agencies will need to examine their programs and work out plans to provide the opportunities for training and education. It also implies that when people find the level at which they want to work and stay they also can have continuing training to keep them up to date and productive. It should also be pointed out that a career system within an agency must be available to all personnel, not just service personnel but to all other staff including clerical staff.

SALARIES FOR SUPPORT PERSONNEL

My last point is the need for an adequate salary and the necessary opportunities for salary advancements within jobs. If we are going to bring people in and provide a range of opportunities, salaries must be comparable at the same level of knowledge and skill for all staff.

RECRUITMENT AND SELECTION OF SUPPORT PERSONNEL

Dr. George E. Ayers
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The topic of recruitment and selection of support personnel is difficult to discuss because of the variously defined functions of these individuals in a variety of social and rehabilitation service settings. Hence, I plan to view this topic from the framework of vocational rehabilitation, and in doing so I wish to note three basic assumptions. Foremost is the assumption that there is justifiable need for support personnel in rehabilitation. Secondly, we are already making use of support personnel and this practice will continue in the area of rehabilitation. The third assumption is that there are two basic functions of support personnel--that is, a case manager and a communicator.

In discussing my topic, I would like to (1) comment upon why we should use support personnel in rehabilitation, and (2) discuss some of the salient factors which necessitate our consideration in the recuitment and selection of support personnel.

THE NEED FOR SUPPORT PERSONNEL IN REHABILITATION

Manpower Crises

In the field of rehabilitation we are confronted with a serious manpower crisis. For example, the McAlees-Warren report (1966) indicated that 2,300 new rehabilitation counselors were needed by 1968 and 300 counselors per year thereafter just to replace those who terminate each year. Smits (1964) has estimated that by 1970 State vocational rehabilitation agencies will be required to recruit 787 new counselors annually.

There are four major areas which have made this critical need for additional personnel in the area of vocational rehabilitation. Foremost is the quality and quantity of existing programs. It is evident that we need to maintain quality and develop new rehabilitation programs to meet the complex needs of the handicapped and disadvantaged. This cannot possibly be achieved without utilizing other manpower resources, such as support personnel.

Secondly, the extension of services to new clients has placed increased demands upon rehabilitation personnel. As a result of the 1965 amendments we are authorized to serve the behaviorly disordered and disadvantaged. Both of these groups are vaguely defined by Federal regulations, but they constitute a new challenge to traditional approaches, values, assumptions, and beliefs of professional people in rehabilitation. One of the problems we are encountering in trying to deal with these new clients, which provides a basis for support personnel, is that we have attempted to provide rehabilitation services from a middle-class framework. Most of the clients in these groups come from the lower class with different values and cannot fit easily into this particular framework.

Thirdly, the dynamic social revolution where minority groups, the poor, and other oppressed people are demanding an opportunity to participate in the mainstream of society has also provoked the need for more effective rehabilitation services. It is without question that additional personnel at all levels will be needed to meet the service needs of these persons. They are going to constitute a challenge which I don't think many of our counselors in rehabilitation today can meet. We, therefore, are going to need a new breed of counselors who can effectively help the disadvantaged overcome some of their problems and get them into and through the rehabilitation system. It has been pointed out in the literature that the different classes, ethnic groups, and life styles of the people we are trying to serve create new challenges for rehabilitation counselors.

PROFESSIONAL IDENTITY CRISES

Another crisis that we have been confronted with in rehabilitation for many years is professional identity. There is one group which includes public agency people who feel that rehabilitation counselors should be trained for specific functions within their agencies. In other words, his primary role is one of a coordinator. Then there is another group, mainly those of us in academic settings, who feel that the vital role of the counselor is counseling. So we have two very different viewpoints relative to the role and functions of the counselor. This has created many problems in that many of the counselors who have been trained in graduate educational programs in colleges and universities are not really performing those activities for which they have been trained. There are a number of studies being conducted by two national rehabilitation organizations (National Rehabilitation Counseling Association and American Rehabilitation Counseling Association) on the role and functions of the rehabilitation counselor. Hopefully, the results of these studies will not only define the specifics of the counselor role, but will also reveal information relative to areas where support personnel can be used.

Another problem influencing the professional identity of counselors centers around the lack of certification standards. We do not have in the area of rehabilitation today certification standards (universal standards that are used by all states in this country) for counselors. This deficiency has constituted a problem in advancing a professional image among rehabilitation counselors. The National Rehabilitation Counseling Association, therefore, has found it necessary to undertake a study for the establishment of certification standards for rehabilitation counselors.

Because the rehabilitation counseling profession is going through many changes, the concept of support personnel utilization may threaten many counselors. They are not definitely sure as to what their precise role and functions are in the rehabilitation process, and when we talk about bringing in another group of people who possibly can do just as well as they can in terms of performing rehabilitation counseling activities, this constitutes a threat. Complicating the matter is the fact that a majority of counselors in this country hold a B.A. or B.S. degree with little or no academic preparation in rehabilitation counseling. Approximately one-third of the practicing counselors possess a master's degree in counseling.

THE NEED FOR SUPPORT PERSONNEL IN REHABILITATION

Irregardless of the fact that support personnel may constitute a threat to the current and existing system of rehabilitation counseling, they have significant potential for helping to increase the effectiveness and expansion of rehabilitation services to the handicapped and disadvantaged. They can help bridge a gap, particularly in the area of communication with culturally different clientele whom we will be working with more in the future. Many support personnel can show good judgment and, more importantly, can provide models for many people who haven't had the opportunity to participate in the world of work. Pearl and Riessman (1965) in their book New Careers for the Poor support these factors relative to characteristics and use of support personnel. They characterize the nonprofessional aide as an "expeditor" who facilitates the delivery of service by playing a variety of roles, including those of interviewer, interpreter, helper, negotiator, escort, and baby sitter. Of all the areas in which support personnel can contribute to the rehabilitation process, the area of communication is probably the most significant. They can reduce the distance that exists between the professional person and lay person.

From numerous studies Pearl and Riessman (1965) have shown that selected residents from low-income neighborhoods can function effectively as nonprofessional helpers. They report that such aides are very successful in developing rapport with "hard-to-reach" clients. These nonprofessionals, sharing as they do life styles and common understandings, provide a model with which to identify. Being sympathetic to problems they have experienced themselves, aides are well suited to break through the "strangeness" that exists between professionals and non-users of services.

RECRUITMENT AND SELECTION OF SUPPORT PERSONNEL

There are a number of basic factors which necessitate consideration in recruiting and selecting support personnel. In considering these areas, one has to keep in mind that the agency that employs these people will determine some of the specific procedures. In recruiting support personnel, we need to establish a well-organized recruitment program. As indicated earlier in my presentation, we should attempt to recruit people from those areas and groups where rehabilitation intends to intensify and expand its services. For example, a support personnel who is black may be more successful in performing his role in a predominately black area.

This is contrary to the belief of many people including many of you who indicated in the group workshop sessions that it was not essential that a person who comes from a certain ethnic group be recruited to work in that area. Well, in view of the social revolution that is taking place today, I think it is very important. For example, I would question the recruitment of a white person to work with blacks in Harlem. It would be more appropriate to select a black person who (1) has the necessary sensitivities and understandings of their problems and needs and (2) the residents of the area can identify with.

The situation that Mr. Keaton is in in Minnesota presents a concrete example. If Morris were white and went into Northside Minneapolis at the time they initiated the Pilot Center Project, I don't think that he would have been successful.

We can recruit support personnel from a variety of sources. A major untapped source is persons from many of our community action projects. There are many people who reside within communities with such projects who possess the skills and abilities to function as support personnel. Yet, they are ignored because of the stereotyping attitudes that they are not motivated and are lazy. Many of these people may not have an impressive educational background, but they do have the skills and capacities vital to communication and understanding of people.

Ridenour (1968), in a rehabilitation project supported by RSA and carried out in Watts (Los Angeles), pointed out that she went into the community of the people to be served to recruit project staff. One other significant thing Ridenour did in recruiting these people was not to use education as a sole criterion for selection. She used the individual's experience within the community as a substitute for education. Moreover, she also sought people who had at one time been a public offender or drug addict. In fact, Ridenour recruited about 15 people from U.C.L.A. who had been convicted or arrested for the possession of narcotics. She found that many of these people performed excellently in the role of support personnel.

Goodman and Arnold (1967), in discussing the training and utilization of nonprofessional personnel in a project for the mentally retarded in New York at Retarded Infant's Service, indicated that their applicants were recruited from Employment Service, guidance counselors, community agencies, and anti-poverty programs. Another study by Savino, Kennedy, and Brady (1966) entitled "Using Nonprofessionals in Mental Retardation" pointed out that indigenous nonprofessionals, particularly from lower socio-economic groups, can be uniquely effective within their own subculture.

SELECTION FACTORS

There are a number of factors which necessitate our consideration in the selection of people for support personnel positions.

1. Age. Many studies suggest that it is extremely difficult

to recruit young people and persons over fifty years of age. Nevertheless, it seems that one of the greatest untapped manpower resources in our society today is the school drop-out--the young person who still has potential for being trained for some type of task. Although a number of studies indicate that people in excess of fifty years of age are difficult to hire for support personnel positions, there are many such people who have some work potential left. For example, Fendell (1967) reported on a project in Manchester, Connecticut, where individuals sixty years of age and older were employed as aides in a workshop setting. In the Institute for Rehabilitation Services publication (1968) entitled "The Use of Support Personnel in Rehabilitation" it was reported that age was a significant factor in the selection of support personnel. Hence, it is hoped age is not used as a barrier in selecting people for support personnel positions.

2. Education. Many rehabilitation programs have indicated that two years of special education is essential in selecting persons. The literature dealing with this area stated that the majority of the rehabilitation programs require a minimum of two years. In fact, many of the programs in our region prefer an individual who has had at least two years of college or a B.A. degree. Savino and Schlamp (1968) feel that aides must have an adequate amount of schooling, perhaps high school graduation. They must have no conflicting responsibilities at home, demonstrate empathic appreciation of the client and have a feeling for internal as well as external factors in maladjustment.

   The approach that Ridenour (1968) used in the Watts rehabilitation project was ideal in that it substituted the person's experiences for actual academic education. All of our institutions of higher learning are now confronted with a revolution which is questioning this. I also wonder if providing these people an academic education will make them more effective than by just providing them an opportunity to utilize their naturally developed talents. Research tends to suggest that the more academic training a person receives, the more impersonal and insensitive he becomes. If this is true, it is understandable why the professionally trained person may find it a challenge in dealing with clients.

   In essence, academic education as a sole criteria for selecting people for support personnel positions should not be used. Emphasis on such credentials have denied many capable people the right to work. We should consider the previous life experiences of these people as they relate to specific position needs.

I am reminded of an article by Mary Switzer (1967) on mental retardation where she remarked that every human being has at least four or five talents. Most people would agree that every human being does have talent which can be mobilized and used in carrying out the rehabilitation process for the handicapped and disadvantaged.

3. Sex. There still seems to exist in our society some questions about the involvement of females in professional as well as subprofessional types of occupations, particularly those occupations traditionally associated with men. Yet, females such as Mrs. Bohannon can perform excellently in support personnel positions. Krantz (1967), in an experimental project using technical aides in counseling, concluded that young married women with a B.A. in psychology, education, etc. and with an occupational life expectancy of one or two years following college graduation before family responsibilities take them out of the job market constitute an excellent source of manpower. Another source of manpower might be those who wish to complete their education with a B.A. degree and yet would like to work in a field of direct social service.

4. Personality Factors. One of the most important areas that we need to consider in the selection of potential personnel candidates is personality characteristics. Can the person relate to other individuals who may be culturally different or come from a specific ethnic group or lower socio-economic class? Do they have the commitment and desire to help such people?

5. Work Experience. A number of the studies indicated that people with long histories of work experience were preferred in selecting them for support personnel positions. This preference is questionable in view of the fact that there are a number of people coming into the world of work who do not have long histories of work experience. The lack of successful work experience may not have been due to the individual but to discrimination or other external environmental influences. However, work experience is an important factor to consider in selecting support personnel.

6. Use of Tests. People who come from disadvantaged backgrounds usually score low on most standardized tests. IQ, aptitude, interest, personality, etc. tests are not adequate assessment instruments for disadvantaged persons. I question the use of tests in selecting people for support personnel positions. Many disadvantaged individuals who want to work won't respond if

they have to go through a series of tests. They have been tested all their lives in a variety of situations, which usually result in showing that they are failures. So naturally they are going to fear failure again and refrain from pursuing a support personnel position. The tests, which are basically middle-class tests, scare them away. In presenting a speech last month at one of our large industrial firms in Minneapolis, the company president informed me that they still use a series of vocational and personality tests to determine whether or not to hire disadvantaged persons. Yet, he felt that he was an equal opportunity employer. How can he be an equal opportunity employer when he knows many of these tests are biased and not effective in predicting vocational success? One other method which holds a great deal of promise for selecting support personnel is the actual job try-out method. Instead of using inadequate and inappropriate tests, we should try them in different types of jobs. In conducting this basic work evaluation, we may be able to discover other talents of these people that can be utilized in providing rehabilitation services.

7. Salary. Another area which deserves consideration in the recruitment and selection of support personnel is salary. Disadvantaged people often have certain unrealistic goals and aspirations about salaries. For example, Henderson (1967), in a study of the aspirations of the poor individuals in the Detroit area, found that many of them had unrealistic aspirations about jobs and unrealistic salary expectations. Nevertheless, we need to establish salary schedules that will be attractive to these individuals. In addition, we have to provide within the system some areas where this particular person can advance to higher positions with further education and training. This implies a vocational career ladder with successive rungs offering increasing professional recognition. Above all, the support personnel position must be an acceptable terminal goal. The person must be provided the economic, social, and personal reward necessary to ensure his recruitment and continued interest.

CONCLUSION

In concluding, I have tried to point out a number of areas that deserve our attention in the recruitment and selection of support personnel. As indicated previously, the agency utilizing such individuals will ultimately determine their roles and functions, as well as the recruitment and selection procedures employed. Nevertheless, we are going to be challenged in this all-important area.

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TRAINING AND SUPERVISING SUPPORT PERSONNEL

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We at the University of Iowa are conducting a research project in the area of in-service training for rehabilitation counselors. In my presentation I will frequently refer to this project, but don't get frustrated if you don't get the full picture of the project; you can obtain a detailed progress report when you leave.

Today I am going to talk about training strategies for rehabilitation personnel, which will be applicable to every level of personnel within the rehabilitation system. I will (1) define and briefly discuss the concept of a learning experience for the adult learner; (2) discuss the research on learning experience for the adult learner, mainly from the standpoint of teaching-learning linkage; (3) discuss learning from the standpoint of common failings; (4) present very briefly a discussion on instructional management guides developed at the University of Iowa; and (5) present both short-term and long-term recommendations for the continuing education process.

DEFINING LEARNING EXPERIENCE FOR THE ADULT LEARNER

A learning experience for the adult learner may be defined as the controlled exposure of a learner to stimulation at the end of which evaluation or feedback is initiated to measure change. Any time you ask a person some question after telling him something, you have in effect attempted to complete a learning experience, since you expect him to give you the right answer. With this definition, a learning unit can be a very micro event. For example, one frame in a program medical instruction text or a three-day workshop could both be a learning unit. It is when evaluation or feedback is given to the learner to allow him to assess his status with respect to the objectives of what the learning experience is supposed to achieve that the learning experience is concluded.

Learning experiences can basically have as their primary objectives one of three behavioral changes. First of all, we may want to develop concepts or information in someone. I might want, for example, to teach the Strong Vocational Interest Blank (SVIB) or theories of vocational interests. In addition, I might want to know if the person can take the SVIB information and integrate it with social information.

The second primary objective for learning experiences can be the development of a skill or proficiency. This is taking the concepts that are rolling around in our minds and trying to implement them in some sequence

Simulated experiences for skill development have several other very desirable characteristics. For one thing, when you do not have a clinical practicum in which you can give trainees a broad range of clients to work with, simulated learning can be a supplement. In real life practicum, the content can be biased. The learner may not get to see all the clients you wanted him to work with because they just didn't come in. A simulated experience can be much broader. You can create devices by which he can get some sense of how to work with other people by viewing and discussing case records or perhaps by observing another student who has a client he didn't get.

The third type of major instructional objective to be achieved in continuing education with adult learners is called self-analysis, self-awareness, attitudes, or dispositions-to-act. This is a real fuzzy area. The kind of learning experiences that have been suggested and actually tried out are such things as sensitivity training. Sensitivity training in its more extreme form such as done by the Esalen Institute is quite comparable to just straight-forwardly receiving psychotherapy. To create a non-threatening learning experience where the person will examine himself requires a lot of characteristics that I don't think agencies ought to be responsible for. If an employee needs radical change in his self-awareness, you should examine your selection procedures because you are probably obtaining some employees who shouldn't be performing in the role of a helping person. You should look at changing pressures that he is receiving on the job and how they affect his behavior. Radical behavior change is not in the purview of work supervisors who are later going to judge whether or not there is a promotion or more money. Some minimal changes for working counselors can be achieved with the use of these groups of sensitivity. However, at this stage of research on sensitivity groups, I would suggest staying away from them.

We might mention self-awareness learning in terms of using discussion groups. What we do get there is some type of verbal release and sharing of common feelings. I don't really see that we are achieving much in the way of attitude change or dispositions-to-act.

THE TEACHING-LEARNING LINKAGE

The first thing that comes up in this teaching-learning linkage is what has been called advanced organizers. With an adult you can tell him in advance what the principle is. Then you give him the facts to subsume it. With the adult, tell him what you are going to teach before you teach him. Let him know where you are going. Advanced organizers have been repeatedly demonstrated to be effective in terms of later content recall by learners.

Single-concept content is a second teaching-learning link. Insofar as possible, you are better off presenting concepts serially. Single-concept learning has been demonstrated to be effective. For example, if you have four important concepts, line them up in serial order as far as possible and teach each one separately. Then teach the learner how to integrate them. This is better than saying that this is a very complex problem and then monkeying around trying to present four ideas at once. If you can in any way get the concept down to serial order, you are much more apt to have later recall with adult learners.

of activities. Thirdly, the development of self-awareness or a change in attitudes or dispositions-to-act may be the primary objective in any given learning experience during the continuing education of rehabilitation personnel. I now want to talk about the research and some common failings connected with the effectiveness of such learning experiences.

RESEARCH AND COMMON FAILINGS IN LEARNING EXPERIENCES

In the concept, or information-giving learning experiences, we can roughly categorize them as the face-to-face variety (e.g., lectures or discussions) or independent study procedures (e.g., correspondence courses, programmed instruction, reading guides, etc.). The independent study procedures of learning with the adult learner have been demonstrated to be just as effective as experiences compared with face-to-face experiences. The face-to-face procedures in their extreme form could be called tutoring. Tutoring, by the way, is a very expensive way to simply transmit concepts and is no more effective than many other methods. There are two paper back books on this topic I would like you to look at. One book is The Teaching-Learning Paradox (Dubin and Taveggia, Center for the Advanced Study of Educational Administration, University of Oregon, 1968), and the other book is Instructional Media (Biggs, et al., Final Report to Office of Education, American Institute for Research, Pittsburgh, 1967). Both of these books are excellent reviews of the research on educational procedures used with the adult - the person who has had a long history of learning behind him, whether it be formal or informal.

Evaluation and feedback are essential to learning. Macro forms of learning experiences (e.g., workshops, courses, laboratories, etc) require the skillful integration of audiovisual hardware with content. This is critical. However, no specific audiovisual hardware has been demonstrated in the research in the past forty years to be more effective than any other. As a matter of fact, when thinking about the continuing education of rehabilitation counselors, aides, or supervisors, we should, because of the research demonstrating all devices can be made effective, usually use the cheaper reliable audiovisual approaches. For example, a very reliable method which is just as good as using overhead projectors is giving out handouts. There is nothing sacred about films, the new slides with audio components inscribed on them, or programmed instruction. So, basically, I am talking about very simple straight-forward devices such as tape recorders, handouts in a ditto or mimeographed form, or possibly overhead projector slides. Such hardware should be utilized in a manner consistent with teaching-learning linkage-- a matter I will also discuss.

In the skill or proficiency development, the types of learning experiences that can be distinguished are the clinical practice (practicum) as well as simulated learning experiences. In simulated learning experiences we try to duplicate, in effect, clinical practice. In some circumstances, you need a simulated learning experience because the real thing may kill somebody. One of the most advanced audiovisual devices ever used for simulated work experience is the Link Trainer - a training device for pilots. It, in effect, creates all kinds of "very dangerous" situations for pilots without risking passengers.

Continuous evaluation and response by the learner and the use of feedback is important as a teaching-learning link. Feedback is something which is not going on between you and I. I don't have a way in which I can get you to respond. Ordinarily, the learner needs to get continuous evaluations of where he is in regard to the material he is to learn. The learner needs to know where he is so that he can change whatever he is doing, if he would like to, in regard to the content.

Multi-media presentation is to be preferred over single-media presentation when dealing with important concepts. If I just talk and you have to rely on your ears only, you aren't learning as well as if I could let you see it and hear it. Some adults learn more effectively in a pictorial way as well. Multi-media presentation is a teaching-learning link just as the others.

Sectioning of learners, the last teaching-learning link, causes a lot of negative ideas. In sectioning learners, one tries to group learners in a way that makes the learning experience more meaningful, because learners are "ready" for the experience. To create an effective learning experience you should (1) map out the objectives; (2) map out all events that you want to achieve that objective through; (3) plug in your audiovisual content so as to achieve that objective most effectively through feedback and in terms of advanced organizers; and (4) finally, in terms of the people that you are going to expose to this, you ought to know characteristics in them that you want to take into account for exposure to the learning experience. For example, you start with Introduction to Sociology before you take Advanced Sociology.

In pitfalls of common learning experiences I want to bring out the big artillery. One thing that you have to be cautious about in constructing learning experiences is purchasing a lot of expensive audiovisual hardware that does not have great flexibility. Another thing is unreliability of content in such experiences. You have to be very sure that the design of learning experiences will reliably deliver the same concepts to different groups of learners. For example, we might conduct a three-day workshop as sort of one big blast from which we all float home. We actually haven't been exposed to standardized content. We have no way of retrieving concepts for review when we once get home.

One of the biggest problems in learning experiences is that they are just poorly designed. The person designing a learning experience in the field has to have just as much concern and care as a teacher who makes up a lesson plan. You can't play it by ear. In-service training for rehabilitation personnel is so important that it requires as much skill, preparation and talent as any high school, college, or elementary school.

INSTRUCTIONAL GUIDES

Finally, of course, there are in-service learning experiences that are simply unrelated to the total program of learning. I want to show you something (visual slide) that is one type of instructional guide for rehabilitation counselors. I have three columns here which are instructional objectives, job activity, and instructional form. When you try to build a learning experience you want to get a curriculum picture first. In column one there are three types of instructional objectives that you might want to achieve. They are concepts, skills, and dispositions-to-act. What is it that you want a learner to exhibit as a behavior after he is finished with a learning experience? Do you want to give information, develop a skill, or do you want him to develop some type of self-awareness?

The second column of job activities is grouped into counselor-client interaction, information processing, resource procurement, administrative work, and professional promotion categories. In what areas of a job do you want to concentrate this series of learning experiences?

Finally, in column three the forms of instruction are broken down into (1) during employment experiences and (2) through employment learning. During employment experiences are courses, workshops, seminars, etc. which might be arranged away from the job. Through employment learning experiences are gained on the job as part of the work pattern.

If you take one element from each column, for example, concept development, counselor-client interaction, through employment learning, you have the elements for one type of learning experience. As you can see, the table presents quite a few permutations between columns.

RECOMMENDATIONS

I have discussed a number of fairly simple, straight forward things that you might consider doing to improve the continuing education of your aides, counselors, or supervisors. The first thing you need is an inventory of resources. How many of you know of every college course in your area which someone in your agency could profitably attend? Do you know the course restrictions and their actual content? This is not a very high powered, complex kind of an inventory, but I do see it as a first step. In addition, I wonder if any of you have talked to a community college professor relative to building a tailor-made course for your staff.

Another simple, straight forward, practical thing that you could implement is to develop cumulative training record cards on every person who works for you. I don't have the essential conceptual categories that you ought to use in that cumulative training record card because each of you would have different categories anyway. Once the staff member knows that a record is being kept, that is another motivating factor to undertake continuing education experiences. In any event, you could start such record keeping on a volunteer basis.

Finally, the development of work evaluation and competency norms are very important, and you could work on this. In evaluating staff performance you can use a relative norm indicating a person's performance with regard to his co-workers. The other way of evaluating a person is to put him on a pass/fail basis. Technically, this is a criterion-referenced norm, where a person performs at some level of mastery or competence and not compared to his peers. A lot of the dimensions of counselor performance should be converted to the mastery or criterion-referenced concept in norming. I don't care if a person can get three more right answers on a multiple-choice test than someone else. What I want to know is can he perform at a given level with some practical significance. We can develop, by talking to the staff, fairly well defined competencies. The conversion of your thinking from a relative level to a mastery level in norming is more straight forward and effective in personnel evaluation than a lot of this normal-curve nonsense.

University training programs should submit a coherent program of in-service training for practicing staff. These in-service training programs, by and large, should de-centralize the major components of campus training programs throughout the State. This calls for a lot of change in the universities. The extension service for instruction in the universities in the years ahead will be the most important division in the whole university. With attention to teaching-learning links, we can be just as effective off campus as we are on campus, perhaps even more effective.

If you have talked to graduate school deans and other university administrators, you know they are all rigid about residence requirements. Why does a person have to be on campus a certain amount of time before we want to give him a degree? They say, "what do you want to do, just mail them out?" Actually that would be a pretty good idea if we have a coherent program out there that is demonstrated to be as good as the one we have on campus. Administrators shy away from mail-order education, not because in some scientific sense such instruction is inferior, because they don't like the concept of mail order.

Universities can develop training materials to be deposited at regional training centers. Helping agencies could utilize such material as the need arose, and they would have the necessary, relatively inexpensive audio-visual hardware to back it up. Then we would see some rather dramatic improvements in the performance of our people, that is, once we can reach them in a coherent way as far as in-service training goes.

SECTION II: SUMMARY OF WORKSHOP SESSIONS

SUMMARY REPORT OF WORKSHOP SESSIONS: GROUP A

Chairman: Ardo M. Wrobel, Director
Mental Retardation Programs
Department of Public Welfare
St. Paul, Minnesota

Recorder: Wayne Wittman
Rehabilitation Specialist
Facilities and Social Security
Department of Public Welfare
St. Paul, Minnesota

Group A had three full meetings at which the use of persons with less than formal professional training in counseling was discussed. Mr. Morris Keaton, a resident of North Minneapolis who has been functioning in the role of a support personnel, was a resource person in our group. His presence and participation allowed us to examine some of the implications of the use of nonprofessionally trained persons functioning in a support role in a vocational rehabilitation counseling unit. There was no verbalized resistance to the idea of developing a role for support personnel. Our discussion centered around a specific task that a support person could perform and the qualifications, career opportunities and compensation for support personnel.

Problems which would need to be addressed include the job title and definition for a person functioning in a support capacity. The terms "aide," "technician," and "support person" were examined with attention to the subservient connotations in the words. Civil Service personnel noted a need for definite job descriptions and questioned their responsibility for providing for career development and vocational planning for persons hired to perform these tasks.

We discussed some philosophy of the employer's role in career development and the responsibilities to avoid "people pollution." There was some recognition that there may be concern of the professionals for protecting their occupational status and job security.

SUMMARY REPORT OF WORKSHOP SESSIONS: GROUP B

Chairman: LaVon Hameister, Supervisor
Bureau of Staff Development
Department of Social Service
Des Moines, Iowa

Recorder: Margaret Cunningham
Medical Care Administration Specialist
Medical Services
Social and Rehabilitation Service
Kansas City, Missouri

A number of areas were discussed in the workshop sessions by Group B. The substance and outcomes of these discussions are summarized as follows:

1. The bringing in of support personnel means that States need to look at the complete range of programs and services, identifying tasks under all manpower programs which should make for a more effective utilization of personnel.

2. Identifiable functions for support personnel may be ascertained by (1) taking tasks from personnel already in the program and carving out separate tasks for support personnel; (2) adding an extension to services which have not been offered to date; or (3) mixing of both methods.

3. States are approaching the use of support personnel from two divergent approaches. Some States are using a systems analysis approach, while others are hiring "outreach personnel" and allowing them to set their own tasks.

4. States see support personnel being added on a gradual basis. This is dependent particularly on: (1) training programs being available; and (2) supervisory personnel being available for agency in-service training.

5. The many tasks among the wide range of programs should provide a basis for better utilization of all personnel in all services. A health department representative pointed out that overwhelming numbers of support persons can throw a whole range of professional jobs off balance and this has been a sad experience for them. Hopefully, we won't make the same mistake.

6. It was highly recommended that we should purchase services rather than attempting to duplicate them

among agencies. Funding is provided. Service delivery has been ineffective under the systems that we have had to date. We have to look at the tasks and separate them out and make a better utilization of all programs from our top masters to our support personnel.

7. The "career-ladder" concept must be available. It was pointed out that only a reasonable number of support personnel will have the motivation and/or interest to go up a "career ladder." Community colleges are becoming more available for training of clients for positions in health and welfare fields. Nevertheless, we will have to offer the opportunity for a career ladder.

8. States will need to have a new look at recruitment and evaluation of applicants. We have ruled out for this group educational qualifications and written examinations. The backgrounds of many of the deprived personnel now considered eligible would have not been acceptable prior to this date.

9. Concern was expressed about the supervisory role which will be necessary with the new implementation of support personnel programs. Will it be handled as it is now? What training will be necessary? Who should supervise them? Should this be a new type of supervisory role? Where do we get the personnel?

10. The Congressional mandate is that support personnel must be involved in services, program planning, and administration. States can't take the easy way out where training programs could supply homemakers, home health aides, community aides, etc.

11. The importance of "bringing along" program personnel and administration cannot be over emphasized. The professional staff is already threatened. Professionals could "freeze out" support personnel and administration make no adequate request for funding.

12. By whatever method States arrive at the employment of support personnel, performance must include: (1) job satisfaction; (2) adequate compensation; and (3) educational opportunities.

SUMMARY REPORT OF WORKSHOP SESSIONS: GROUP C

Chairman: Kenton Williams, Director
Division of Child Welfare
Department of Public Welfare
Lincoln, Nebraska

Recorder: Ann Kennedy
Assistant to Associate
Regional Commissioner
Social and Rehabilitation Service
Kansas City, Missouri

The use of support personnel in Wyoming and Minnesota was discussed in detail, these two States apparently being the farthest along in their use of such personnel by vocational rehabilitation. Neither State has established a testing procedure for applicants prior to the employment of the two support personnel who spoke here. Nor were there any minimum qualifications established. Both people were chosen competitively from interviews and discussions by individuals and with a panel. Simplicity and direct approach of support people seemed to be the keys to success for these two support people.

Other States represented were in various stages of planning for use of support personnel. Problems presented for discussion included:

1. Inadequate statements of job duties and job qualifications for both professionals and nonprofessionals.

2. Inequities in structures in providing for advancement opportunities, e.g., further schooling, etc., between nonprofessional support personnel and administrative personnel.

3. One State was using unpaid stduents working on master's degrees who had more education than some of the counselors, which created problems. Another State would not assign such students to support personnel positions, only to professional tasks.

4. One State brought out that retarded or handicapped persons should have the right to go as far as they can. This means help from people, but not necessarily graduate degree people!

Kenton Williams brought out the key question: what does it take to get the job done? Only when this is established did he think it was time to go out and get the people to do those things that get the job done. This tied into Corinne Wolfe's thinking. The real question was how to do it.

Another State brought out that the goal of the whole thing was the extension and enrichment of services provided and that the support worker should be considered a necessary part of bringing a better service to the client. Moreover, the worker needs to have a strong self-image instead of an "assistant" image--an image of himself giving these better services which will in turn result in his greater involvement as a person.

It was brought out that many times even the State doesn't know what needs must be met. So the most highly trained person to be found is employed in the hope he will find out what the needs are. Then a year or two later that person comes back and says he doesn't know what he is supposed to be doing.

There was considerable discussion on anxieties of the professional over giving up "part of his job" to the support worker and the professional's inability, rather than unwillingness, to delegate. It was brought out that lack of ability to delegate exists in many professions. In Wyoming and Minnesota, the aides considered themselves definitely support persons, thus not "threatening" the professional.

Both States had training programs. Wyoming's support personnel have training two days a month, with university participation, and other general sessions outside the home locale. Minnesota can get all B.A. workers they need. They make use of aides for financial reasons. They do not use aides just as assistants to case workers. They have units of aides, with a supervisor, who handle cases of their own. Some Minnesota counties have a team approach and handle all aspects of the case. Others may call in a social worker if there are specialized problems and the supervisor recommends it.

Salaries of aides	- In Wyoming only one class	- $325
	- In Minnesota - Junior	- $300
	- In Minnesota - Senior	- $700

Mr. George Stark brought out that the subprofessional may bring a new dimension to the job; in many instances where we get into outreach activities individuals indigenous to an area are better able to perform the outreach. This is something not done before. For this skill there must be willingness to pay regardless of whether such persons have sixth grade education or are Ph.D.'s. It was emphasized that we must be willing to acknowledge these skills in the pay check. Minnesota has already considered this and recognized it by making a two-step adjustment. Iowa had set up a class of program workers I, II, and III, the latter really being a promotional arrangement for people already working in the area.

South Dakota reported a Rehabilitation Director with a master's degree who works with counselors in that State's four primary regions. This person probably works more with the aged than any others.

The question was raised and discussed: How long can a support worker remain effective, especially if he is in at least private disagreement with the counselor? How long will it be before "the system" breaks down the effectiveness of the support worker? Can the worker change "the system" by his or her own in-put?

Discussion followed of personality prerequisites, appearance, and behavior in relation to success of the support worker.

A question was brought out: Are we "hung up" on "success" as just being the getting of a person employed or employable? Should we not be able to measure success in other terms than just employability? An example was given of three long years of patience and effort by an aide endeavoring to teach a wheelchair patient to walk again. The day he took two steps (and later more) the aide's efforts surely should have been chalked up as a very great success. So how do we measure a client's potential? What is meant by potential?

Reactions to the merit system were discussed. It was considered a roadblock by some states. Questions asked by states included the following.

1. Is testing good or does it cause people not to try, for fear of failure or rejection?

2. What is a qualified para-professional or support worker? What are minimum qualifications? One State uses OEO minimum requirements. Another State has a "Special Project Worker" job set up with salary range up to $22,000. The only requirement was that the incumbent could not be paid with State funds.

3. Has probation period use been considered in the selection procedure?

Discussion followed of validation of results from those not tested and those tested--applications, forms, needs, methods, etc. The question was asked how we get a program off the ground if we wait on validation? There was agreement that it is very important to set up for information input from the start, so evaluation can take place as time goes on.

The sessions ended on the need for flexibility in early planning for use of support personnel.

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APPENDICES

APPENDIX A

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APPENDIX B

THE USE OF SUPPORT PERSONNEL IN SOCIAL AND REHABILITATION SERVICE PROGRAMS

MANKATO STATE COLLEGE
MANKATO MINNESOTA

In Cooperation with the
Rehabilitation Services Administration
Social and Rehabilitation Service
Department of Health, Education, and Welfare

MANKATO STATE COLLEGE
Mankato, Minnesota

AN INVITATIONAL CONFERENCE ON THE USE OF SUPPORT PERSONNEL IN SOCIAL AND REHABILITATION SERVICE PROGRAMS

President Hotel
Kansas City, Missouri

May 7-8, 1969

PROGRAM

Wednesday - May 7, 1969

8:30 - 9:00 REGISTRATION-----MRS. MARY CASON Room 229

Chairman: MR. RALPH SUSMAN, Associate Regional Commissioner for Rehabilitation Services, Region VI, Kansas City

9:00 - 9:15 Welcome: MR. E. LYLE KNIGHT, Regional Commissioner, Social and Rehabilitation Service, Region VI, Kansas City

Program Plans and Announcements: DR. GEORGE E. AYERS, Conference Coordinator and Professor and Director, Rehabilitation Counseling Program, Mankato State College

9:15 - 10:15 Keynote Address: "Planning for the Effective Utilization of Support Personnel in Social and Rehabilitation Services"

MRS. CORINNE WOLFE, Chief, Training and Manpower Development Division, Office of Research and Demonstrations, Social and Rehabilitation Service, Washington, D. C.

10:15 - 10:45 Formation of Discussion Groups and Refreshments

10:45 - 12:30 Workshop Session I

Group A--Room 211--Chairman, ARDO M. WROBEL, Director, Mental Retardation Programs, Department of Public Welfare, St. Paul, Minnesota

Group B--Room 215--Chairman, LAVON HAMEISTER, Supervisor, Bureau of Staff Development, Department of Social Services, Des Moines, Iowa

Group C--Room 217--Chairman, KENTON WILLIAMS, Director, Division of Child Welfare, Department of Public Welfare, Lincoln, Nebraska

12:30 - 1:30 Lunch

1:30 - 3:00 Panel Discussion

Chairman: MR. ALFRED E. POE, Assistant Regional Commissioner, Social and Rehabilitation Service, Region VI, Kansas City

Presentation: "The Wyoming Aide Utilization Project"

MR. MIKE HUSTON, Special Services Consultant, Division of Vocational Rehabilitation, Cheyenne, Wyoming

Presentation: "The Minnesota Aide Utilization Project"

MR. MARVIN O. SPEARS, Director of Operations, Division of Vocational Rehabilitation, St. Paul, Minnesota

Presentation: "The Rehabilitation Aide's Perception of His Role"

MR. MORRIS KEATON, Rehabilitation Aide, Division of Vocational Rehabilitation, Minneapolis, Minnesota

MRS. BILLIE B. BOHANNON, Rehabilitation Aide, Division of Vocational Rehabilitation, Cheyenne, Wyoming

3:00 - 3:30 Movement to Discussion Groups and Refreshments

3:30 - 5:15 Workshop Session II

6:00 - 7:00 Social Hour

Thursday - May 8, 1969

8:30 - 10:00 Panel Discussion

Chairman: MR. PAUL W. NIXON, Assistant Regional Commissioner, Social and Rehabilitation Service, Region VI, Kansas City

Presentation: "Career Planning for Support Personnel"

MRS. CORINNE WOLFE, Chief, Training and Manpower Development Division, Office of Research and Demonstrations, Social and Rehabilitation Service, Washington, D. C.

Reactors: ROBERT L. VEAZEY, Acting Regional Representative, Office of State Merit System, Kansas City

MR. NORRIS STEENBERGER, Director of Personnel Division, State Department of Business and Administration, Jefferson City

EDWIN LANE, Assistant Director, Department of Civil Service, St. Paul

AUDIENCE PARTICIPATION

10:15 - 10:30 Movement to Discussion Groups and Refreshments

10:30 - 12:00 Workshop Session III

12:00 - 1:00 Lunch

1:00 - 2:00 Panel Discussion

Chairman: MR. THOMAS WALSH, Training and Manpower Development Specialist, Social and Rehabilitation Service, Region VI, Kansas City

Presentation: "Recruitment and Selection of Support Personnel"

DR. GEORGE E. AYERS, Professor and Director, Rehabilitation Counseling Program, Mankato State College

Presentation: "Training and Supervising Support Personnel"

DR. LEONARD MILLER, Associate Professor and Director, Rehabilitation Counseling Program, University of Iowa

2:00 - 3:00 Workshop Session IV

3:00 - 3:30 Refreshments

3:30 - 4:00 Panel Discussion - Reactions to the Conference

Chairman: DR. GERALD GREEN, Assistant Regional Commissioner, Social and Rehabilitation Service, Region VI, Kansas City

Group A: ARDO M. WROBEL, Chairman
Group B: LAVON HAMEISTER, Chairman
Group C: KENTON WILLIAMS, Chairman

Reactor: MISS HILDA TEBOW, Manpower Training Specialist, Social and Rehabilitation Service, Region VIII, Denver, Colorado

Closing of Conference: DR. GEORGE E. AYERS